

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4808 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes 📝 No

(CFA-4) Summary Sheet

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization)				
ZAGAR FOR SENSIBLE GOVERNMENT				
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number			
			₎ 697-4637	
4. Mailing Address (address where all campaign finance correspondence is received) Check if this is a new address 10423 CEDAR DRIVE				
. City, State, ZIP Code 6. Party Affiliation (if applicable)				
FISHER, IN 46037.	Republican			
CANDIDATE INFORMATION (For Candidate's Committees Only)				
, , ,		filiation or if independent	Candidate	
Pamela J. Zagar	Repub	Republican		
 Office Sought (Include district number, if any. Not required for exploratory committee.) Fall Creek Township Board 		10. County of Residence Hamilton		
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY	
11. Check one:		Check one:	Chack one: Pre-Convention	
Pre-Primary Pre-Election Annual Nomination Other		De-Conve		
Final/Disbanda Committee (lines 18, 19, and 20 must be 10) Dulgoing Treasurer (within 10 days amend Statement of Organization)			ention	
12. Reporting Period:		COLUMN A	COLUMN B	
From: 10/21/2014 Through: 12/31/2014		This Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.				
14. Cash on hand and investments January 1, current year.				
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, se well as cash contributions.)				
15a, Itemized (use Schedule A)			0.00	
15b. Unitemized		0.00	0.00	
15c. Add lines 15s and 15b in both columns SUBTOTAL		0.00	0.00	
	TOTAL	0.00	0.00	
EXPENDITURES	TOTAL	0.00_	0.00	
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0.00	0.00	
17b. Unitemized		0.00	0.00	
17c. Add lines 17e end 17b in both columns 8U	BTOTAL	0.00	0.00	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0.00	0.00	
19. Dable OWED BY the committee (use Schedule D)		0.00		
20. Debis OWED TO the committee (use Schedule E)		0.00		
CATION FOR DEFINE ONLY				
FOR OFFICE USE ONLY MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE STATE OF THE CONTROL OF THE CONTR				

Dy #313 CANDIDATE 01/16/2015 13 01/16/2015 | 1 : L HV OZ NYC SIOZ tie or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly to who faits to file a complete or accurate report as required by the Indiana may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)